Fill in this info	ormation to identify your co								
	Angela Rena	de Spence			-				
Debtor 2 (Spouse, if filing)					-				
United States	Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO		_				
Case number	14-52355	14-52355			Check if this is:				
(If known)			-			An amende	d filing		
							ent showing post as of the followir	tpetition chapter ng date:	
Official	Form 106I					MM / DD/ Y	YYY		
Schedu	ile I: Your Inc	ome						12/15	
	u are separated and you rate sheet to this form. Describe Employment								
Fill in your information.	our employment tion.	Debtor 1			Debtor 2	Debtor 2 or non-filing spouse			
attach a se	ave more than one job,	Employment status	■ Employed		☐ Employed				
	separate page with on about additional	Employment status	☐ Not employed			☐ Not employed			
employe	ers.	Occupation	Self EmployedChildcare						
	part-time, seasonal, or ployed work.	Employer's name							
	ion may include student maker, if it applies.	Employer's address							
		How long employed t	here?						
Part 2:	Give Details About Mor	nthly Income							
	nthly income as of the day	ate you file this form. If	you have nothing to re	port for a	ny line, v	vrite \$0 in the	space. Include y	our non-filing	
If you or your more space, a	non-filing spouse have mo	ore than one employer, co	ombine the information	for all er	nployers	for that perso	n on the lines be	elow. If you need	
					For	Debtor 1	For Debtor 2 non-filing sp		
	nthly gross wages, sala ons). If not paid monthly,			2.	\$	2,166.00	\$	N/A	
3. Estimat	e and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	

2,166.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Angela Renae Spence	-	C	ase number (if kr	nown)	14-5	2355		
				1	For Debtor 1			Debtor 2		
	Cop	by line 4 here	4.	-	2,166	6.00	\$		N/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. (6	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		·	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	. 9	. ————	0.00	\$		N/A	_
	5e.	Insurance	5e.	. :	6	0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.	,	6	0.00	\$		N/A	
	5g.	Union dues	5g.	. :		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h.	.+ \$	§	0.00	+ \$_		N/A	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	5	0.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,166	00.6	\$_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	. :	6	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. 9		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. :		0.00	\$		N/A	_
	8d.	Unemployment compensation	8d.	. (•	0.00	\$		N/A	_
	8e.	Social Security	8e.	. (6	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.	.+ :	<u> </u>	0.00	+ \$_		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/A	4
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2,166.00	+ \$		N/A	= \$	2,166.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					,
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	2,166.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						monthl	y income
		No.								
		Yes. Explain:								

Fill	in this information to identify your case:				
Deb	tor 1 Angela Renae Spence		Che	eck if this is:	
				An amended filing	
1	tor 2 puse, if filing)			A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO			MM / DD / YYYY	
1	e number				
L					
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info nur Par					
1.	Is this a joint case?				
	No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househo	old of De	btor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Nephew		18	■ Yes
					□ No
					☐ Yes
					□ No □ Yes
					□ res
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est	imate your expenses as of your bankruptcy filing date unless your say of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I:</i> Y ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.		10.00
	4d. Homeowner's association or condominium dues		4d.	Ф	0.00

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1	Angela Renae Spence	Case numb	er (if known)	14-52355
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	105.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
6d.	Other. Specify:	6d.	\$	0.00
7. Fo c	d and housekeeping supplies		\$	445.00
	Idcare and children's education costs	8.	\$	0.00
9. Clo	thing, laundry, and dry cleaning	9.	\$	15.00
10. Per	sonal care products and services	10.	\$	15.00
	dical and dental expenses	11.	\$	15.00
	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	100.00
3. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Cha	aritable contributions and religious donations	14.	\$	0.00
5. Ins	urance.		-	
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	111.00
15d	. Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:	16.	\$	0.00
7. Ins t	allment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	0.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17d	. Other. Specify:	17d.	\$	0.00
	ir payments of alimony, maintenance, and support that you did not report as		_	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Oth	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sch			
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.		0.00
	. Property, homeowner's, or renter's insurance	20c.		0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
1. O th	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		¢	000 00
	· ·		\$ \$	866.00
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		· • — — —	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	866.00
3 Cal	culate your monthly net income.	L		
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,166.00
	Copy your monthly expenses from line 22c above.	23b.		866.00
230	. Copy your monthly expenses from the 226 above.	200.	Ψ	00.00
230	. Subtract your monthly expenses from your monthly income.			
200	The result is your <i>monthly net income</i> .	23c.	\$	1,300.00
	The result is your monthly not moonle.	L		
	you expect an increase or decrease in your expenses within the year after y			
	example, do you expect to finish paying for your car loan within the year or do you expect you	ır mortgage p	ayment to incre	ease or decrease because of
_	ification to the terms of your mortgage?			
I	No			
	Fynlain here:			

Fill in this info	rmation to identify your	case:					
Debtor 1	Angela Renae Sp	Angela Renae Spence					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO				
Case number	14-52355						
(if known)							

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	Γ an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read that they are true and correct.	I the summary and schedules filed with this declaration and
X /s/ Angela Renae Spence	X
Angela Renae Spence Signature of Debtor 1	Signature of Debtor 2
Date December 4, 2017	Date